

UNITED STATES DISTRICT COURT  
for the  
DISTRICT OF MINNESOTA

Cause No: 24-cv-100 SRN/DTS

PRESTON BYRON KNAPP;  
MICHELLE NICHOLE KNAPP.

*Plaintiffs,*

vs.

COMPASS MINNESOTA, LLC;  
DANIEL PHILIP HOLLERMAN (*official and  
individual capacities*).

*Defendants.*

Honorable Judge Susan Richard Nelson  
Magistrate Judge David T. Shultz

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**AFFIDAVIT OF SERVICE**

**DEFENDANT:**

COMPASS MINNESOTA LLC  
1010 Dale St. N  
Saint Paul, MN 55117

I, Joey Kimbrough, being over the age of eighteen, NOT a party to this cause, and competent to testify as to the matters asserted herein. I certify that on 1/16/2024 a copy of the Summons and Complaint were sent to the Defendant listed above via USPS Certified Mail with Signature Required.

DOCUMENT TYPE: Summons and Complaint from PRESTON BYRON KNAPP and MICHELLE NICHOLE KNAPP

CORPORATE SERVICE TO: COMPASS MINNESOTA LLC

SIGNED AND RECEIVED BY: "Bob ... (illegible)"

DATE RECEIVED AND SIGNED: 1/25/2024 at 10:55am

***Certified Mail Receipt and Signature Card enclosed as "Exhibit B"***

I SWEAR UNDER THE PENALTIES FOR PERJURY THAT THE FOREGOING REPRESENTATIONS ARE TRUE.

DATED: 2/1/24

SIGNATURE OF AFFIANT: Joey Kimbrough

Exhibit "B"

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Tracking Number:

70211970000222130706

Remove X

☐ Copy ☒ Add to Informed Delivery

Latest Update

Your item was delivered to an individual at the address at 10:55  
am on January 25, 2024 in SAINT PAUL, MN 55117.

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Delivered

Delivered, Left with Individual

SAINT PAUL, MN 55117

January 25, 2024, 10:55 am

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PS Form 3811, July 2020 PSN 7530-02-000-9053

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

Complete items 1, 2, and 3.  
Print your name and address on the reverse  
so that we can return the card to you.  
Attach this card to the back of the mailpiece,  
or on the front if space permits.

2. Article Number (Transit)

7021 1970 0000 2213 0706

9590 9402 8422 3156 0371 68

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery 1-25-24

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

Compass Minnesota LLC  
c/o Restricted Agent  
1010 Dale St N  
Saint Paul, MN 55117

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Saint Paul, MN 55117

**OFFICIAL USE**

Certified Mail Fee \$4.35

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$3.55

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.83

Total Postage and Fees \$9.73

Sent To

Street and Apt. No., or P.O. Box No. Compass Minnesota LLC

City, State, ZIP+4® 1010 Dale St N Saint Paul, MN 55117

PS Form 3800, April 2015 PSN 7530-02-030-9047 See Reverse for Instructions

Postmark Here 01/16/2024

EXHIBIT 2